

**Contour Farming Checkout and Certification**

Cooperator:	Field Office:	
Plan No.:	Location:	
Checkout By:	Title:	Date:

Practice Purpose (check all that apply)	
<input type="checkbox"/>	Reduce soil erosion (sheet & rill and wind)
<input type="checkbox"/>	Reduce transport of sediment
<input type="checkbox"/>	Reduce transport of contaminants in runoff
<input type="checkbox"/>	Increase water infiltration

**Document actual practice completion**

*\*Attach diagram or map indicating completion of Deep Tillage.*

Completion/Certification	Field #	Field #	Field #	Field #
% Field Slope				
Minimum Allowable Row Grade				
Maximum Allowable Row Grade				
Actual Row Grade Installed				
Implements Used for Contouring				
Other information				

*I certify that this practice has been carried out as documented and meets standards and specifications.*

Signature: \_\_\_\_\_

Date \_\_\_\_\_